(if applicable).

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

and was amended on

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled CHANGING RELATIONSHI BETWEEN BONES, the specification of which

(check one)

is attached hereto.

as Application Serial No.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendme referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Feder Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate liste below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application c which priority is claimed:

which priority is claimed:			
Prior Foreign Application(s)			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
(number)	(Country)	D. A. A. R. P. P.	Yes No
each of the claims of this application	n is not disclosed in the prior United	(Day/Month/Year Filed) United States application(s) listed below and, inso States application in the manner provided by the	first paragraph of Title 3
occurred between the filing date of the	ledge the duty to disclose material infi he prior application and the national or	ormation as defined in Title 37, Code of Federal R PCT international filing date of this application:	egulations, §1.56(a) which

(Application Serial No.) (Filing Date) (Status—patented, pending, abandoned)

(Application Serial No.) (Filing Date) (Status—patented, pending, abandoned)

Power of Attorney: As a named inventor, I hereby appoint the following attorneys: Thomas L. Tarolli, Reg. No. 20,177; Robert B. Sundheim, Reg. No. 20,127; Calvin G. Covell, Reg. No. 24,042; Barry L. Tummino, Reg. No. 29,709; Paul E. Szabo, Reg. No. 30,429; Stephen D. Scanlon, Reg. No. 32,75 each with full powers of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Tradema Office connected therewith.

SEND CORRESPONDENCE TO:

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CALVIN G. COVELL, (216) 621-2234.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of application or any patent issued thereon.

1) Full name of sole Inventor's signature —	or first inventor PE	TER M. BONUTTI			Date \$17199	
City <u>EFFINGHAN</u> Post Office Address		EFFINGHAM REEN PLAZA, EFFING	-	ILLINOIS IL 62401	Citizenship <u>U.S.A.</u>	
2) Full name of seco	and joint inventor, if any	y				
Inventor's signature					Date	,
City	County		State		Citizenship	
Post Office Address					•	